

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration of the following type:

 X original design

NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application do not check any of next two items and check appropriate one of last three items.

 national stage of PCT supplemental

NOTE: If one of the following three items apply then complete and also attach added pages for divisional, continuation or continuation-in-part.

 divisional continuation continuation-in-part

INVENTORSHIP IDENTIFICATION

WARNING: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION
CLITORIS STIMULATOR

SPECIFICATION IDENTIFICATION

the specification of which:

(a) X is attached hereto.

(b) was filed on as Serial No:
or Express Mail No. , as Serial No. not yet known and
was amended on (if applicable).

NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67

(c) _____ was described and claimed in PCT International Application No. _____ filed on _____ and as amended under PCT Article 19 on _____ (if any).

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of the invention claimed in this application in accordance with Title 37, Code of Federal Regulations. § 1.56(a). Rule 1.63(b)(3)

_____ In compliance with this duty there is attached an information disclosure statement. 37 CFR 1.97

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(d) ☒ no such applications have been filed.

(e) _____ such applications have been filed as follows:

NOTE: Where item (c) is entered above and the International Application which designated the U.S. claimed priority check item (e), enter the details below and make the priority claim.

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

COUNTRY	APPLICATION NUMBER	DATE OF FILING (month, date, year)	PRIORITY CLAIMED UNDER 37 USC 119
			____ YES ____ NO
			____ YES ____ NO
			____ YES ____ NO
			____ YES ____ NO

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Jesus Sanchelima, Esq., Registration No. 28,755
Albert Bordas, Esq., Registration No. 45,595

SEND CORRESPONDENCE TO:

Sanchelima and Associates, P. A.
Jesus Sanchelima, Esq.
235 S.W. Le Jeune Rd.
Miami, FL 33134

DIRECT TELEPHONE CALLS TO:

Jesus Sanchelima, Esq.
(305) 447-1617

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Full name of sole or first inventor: Marco Norma

Inventor's signature X/ [Signature]

Date: 12/6/03 Country of Citizenship: Italy

Residence: 4835 Lakeview Drive, Miami Beach, Florida 33140

Post Office Address: Same as above

Full name of second joint inventor: _____

Inventor's signature _____

Date: _____ Country of Citizenship: _____

Residence: _____

Post Office Address: Same as above

**CHECK PROPER BOX(ES) IF ANY OF THE FOLLOWING ADDED PAGE(S) FORM A
PART OF THIS DECLARATION**

_____ Signature for third and subsequent joint inventors. Number of pages added.

_____ Signature by administrator(trix), executor(trix) or legal representative for deceased or
incapacitated inventor. Number of pages added _____.

_____ Signature for inventor who refuses to sign or cannot be reached by person authorized under 37
CFR 1.147. Number of pages added _____.

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**If no further pages form a part of this Declaration then end this Declaration with this page and check
the following item**

_____ X _____ This declaration end with this page.